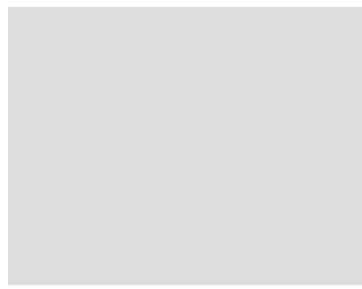# County of San Diego
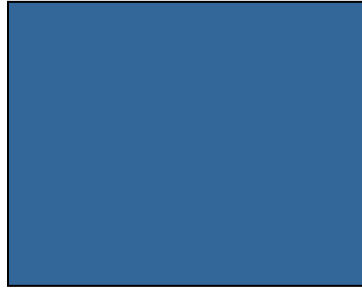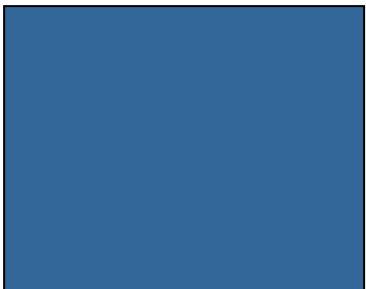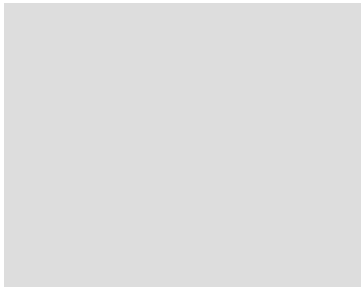# Ryan White Primary Care Program (RWPCP)
Funded by Ryan White Treatment Extension Act (RWTEA)

2020
Provider Handbook

2020 RWPCP Provider Handbook

Attachments:

For your convenience, all Attachments listed in this handbook are hyperlinked to the San Diego County RWPCP website and can be accessed by clicking each attachment individually or by visiting the following address:

http://www.sdcounty.ca.gov/hhsa/programs/phs/hiv_std_hepatitis_branch/RWPC_Contractor_Resources.html

2020 RWPCP Provider Handbook

Overview

The Ryan White Primary Care Program (RWPCP) is administered by the County of San Diego HIV, STD and Hepatitis Branch (HSHB) Public Health Services with funding from the State of California and the Federal Ryan White Treatment Extension Act of 2009 (RWTEA). The RWPCP provides preventive and primary care services to HIV positive patients through a network of qualified community clinics. The program is managed by the Administrative Service Organization (ASO), UnitedHealthcare.

Direct medical services are provided at primary care clinics that contract with HSHB and meet the quality standards required by the HIV Health Services Planning Group. The Medical Standards and Evaluation Committee recommends Standards of Care Practice Guidelines for patients enrolled in the RWPCP for San Diego County. All medical conditions must be related to HIV disease and must be included in the RWPCP scope of services. A listing of all RWPCP participating medical and dental clinics can be found on 5 of this section.

Please direct any program questions to either contact listed below:

County of San Diego   **UnitedHealthcare, ASO**
HSHB Contract Administrator   **RWPCP Program Manager**
(619) 293-4716   **(858) 658-8713**

Eligible Patients

In order for a patient to receive services through the RWPCP, the patient must:

- Have a positive HIV serology
- Not have or be eligible for other health coverage for treatment of HIV disease
- Have a Modified Adjusted Gross Income (MAGI) that does not exceed 500% of the Federal Poverty Level based on the household size and income. (Please Note: Federal thresholds are subject to change. For the most updated information, visit https://www.coverdca.com/pdfs/fpl-chart.pdf).
- Not be younger than 18 years of age, or older than 64 years of age
- Eligibility certification is granted to match their birth month with the need to re-certify their eligibility for RWPC six-months after their birth month

Individuals whose disease state meets or exceeds Social Security Disability criteria for AIDS must be referred for Medi-Cal and/or Medicare.   Through the RWPCP application process, individuals are screened for other health care payers including Medi-Cal.

To receive notice when this Handbook is updated, each Provider is required to provide the HSHB Contract Administrator a "Program Contact", including name, position or title, phone number, and email address. This individual should be involved in the day-to-day operations of the RWPCP and in a position to communicate information regarding the updates to interested parties at their clinic.

HIV Specialty Practitioners

HIV primary care services are provided to enrolled RWPCP patients, and provided by practitioners who must be based at RWPCP contracted clinics. Working practitioners are encouraged to obtain an understanding of the HIV related field and are also encouraged to complete an AETC and AAHIVM annual exam.

Medical Provider Registration & Credentialing

Prior to billing for services, all primary care/medical and dental specialty practitioners must register with the HSHB Contract Administrator by completing the Provider Registration Form. The form should be submitted along with credentialing verification, a facsimile of the State of California medical license, and DEA certificate, if applicable. Services provided by practitioners prior to registering with the ASO will NOT be reimbursed.

Providers must maintain compliance with requirements of Title 22 of the California Administrative Code and the Health and Safety Code of the State of California as a licensed clinic during the time they provide and invoice for services through the RWPCP.

Exclusion, Debarment and Medi-Cal Verification

Effective December 1, 2018, all clinics are required to submit a copy of their monthly verification that no employee or entity providing services under their Outpatient Ambulatory Health Services Agreement is currently listed as debarred, excluded, suspended, or ineligible on the Federal System for Award Management (SAM: http://SAM.gov), the Federal Health and Human Services Office of Inspector General List of Excluded Individuals/Entities (LEIE: http://exclusions.oig.hhs.gov), or the State of California Medi-Cal Suspended and Ineligible list (www.medi-cal.ca.gov). The verification should be submitted prior to submitting claims each month as EDM checks are required prior to payment of claims. Verification may be submitted via fax to (855) 394-7927 or via email to COSD_claims@uhc.com and should be sent to the attention of Ryan White E-D-M Verification.

Services Covered

- Primary care services
- Palliative dental care
- Nutritional counseling
- Treatment Adherence (TA) counseling
- Pharmaceuticals on the approved list
- Secondary Dental patients are eligible for palliative dental services

Services Not Covered

- Physician or dental services provided outside the primary care clinic (available with other funding)
- Vaccines
- Inpatient hospital services
- Outpatient hospital services
- Emergency department services

> **Key Information:**
>
> - Practitioners shall use the HIV Flow Sheet which contains all required elements developed by the Medical Standards and Evaluation Committee.
> - A Sexual Health Risk Assessment Form or another equivalent form shall need to be completed by the patient every 3 – 6 months and filed in the patient's medical record. Exceptions will be documented.
> - A dental referral shall be documented annually.

- CT scans
- MRI and P.E.T. scans
- Invasive diagnostic tests done outside the primary care clinic

Other Resources Available for RWPCP Patients
HSHB has information for other local, State, and national programs which may be of benefit to RWPCP patients. Other sources fund programs such as the AIDS Drug Assistance Program (ADAP), compassionate use programs for medications not covered by RWPCP, medical specialty care and additional dental treatment through Specialty Care arrangements. Services covered in Specialty Care are addressed on Page 12 of this handbook.

Medical Insurance and RWPCP
Some services may be available to individuals who have medical insurance. Typically, this is limited to dental services and some prescription medication not available through ADAP. For more information contact the County or ASO.

Clinic Contacts and Service Locations

Clinic/Program Contact
Each Provider must identify an individual who will serve as the primary contact for RWPCP services and issues. Examples of contact types include notification when changes are made to this Handbook, addressee of Client Service Evaluations submitted to the County, coordinator of site visits with County and/or ASO. Providers should provide the name, title/position, and contact information of the Program Contact to the County Contract Administrator. If the designated individual is no longer able to continue to serve or if contact information has changed, the County Contract Administrator should be notified within 24 hours.

Adding Additional Service Locations
RWPCP services must be provided at one of the clinics listed on the following page. Services provided at locations not registered with the ASO will NOT be reimbursed. Contracted Providers may add clinics by submitting a completed Provider Registration Form to the County Contract Administrator.

Medical Standards and Evaluation Group

The Medical Standards and Evaluation Committee is a sub-committee of the San Diego HIV Planning Group Strategies Committee. The group meets at least three times a year to ensure that HIV Primary Care and dental services provided through local Ryan White funded clinics meets or exceeds established HIV clinical practice standards and Public Health Services guidelines, assuring availability and access to state-of-the-art medical care for all eligible people living with HIV, through the following activities:

- Monitor and discuss current topics and/or changes in the management of HIV disease, treatment, prevention and co-occurring disorders.
- Consider all available community resources for HIV Primary Care services to maximize Ryan White capacity.
- Promote access and facilitate continuity of care with multiple entry and referral points.

- Recommend appropriate upgrades to the standards of care under which the Ryan White HIV Primary Care clinics operate, including opportunistic infections, antiretroviral therapy and prevention counseling/health education.

To help fulfill these duties, the committee routinely reviews, updates and publishes Practice Guidelines for patients enrolled in the Ryan White primary care services.

Each Ryan White funded primary care provider must be represented on the committee by clinical or program management staff.

Participating RWPCP Medical, Dental, and Psychiatric Service Locations

AIDS Healthcare Foundation

3940 4th Ave, Ste 140
San Diego, CA 92103
(619) 516-8936
Medical Services Only

Family Health Centers of San Diego

Beach Area
3705 Mission Boulevard
San Diego, CA 92109
(619) 515-2444
Psychiatric Services Only

Chase Avenue
1111 West Chase Avenue
El Cajon, CA 92020
(619) 515-2499
Medical Services Only

City Heights
5454 El Cajon Boulevard
San Diego, CA 92115
(619) 515-2400
Medical & Dental Services Only

Chula Vista
251 Landis Avenue
Chula Vista, CA 91910
(619) 515-2500
Medical Services Only

Chula Vista
248 Landis Avenue
Chula Vista, CA 91910
(619) 515-2500
Psychiatric Services Only

Diamond
4725 Market Street
San Diego, CA 92102
(619) 515-2560
Dental & Psychiatric Services Only

El Cajon
525 East Main Street
El Cajon, CA 92020
(619) 269-0191
Medical & Dental Services Only

Grossmont
8851 Center Drive, Suite 312
La Mesa, CA 91942
(619) 515-2300
Psychiatric Services Only

Grossmont-Spring Valley
8788 Jamacha Road
Spring Valley, CA 91977
(619) 515-2330
Medical & Dental Services Only

Hillcrest
4094 4th Avenue
San Diego, CA 92103
(619) 515-2300
Medical, Dental & Psychiatric Services

Logan Heights
1809 National Avenue
San Diego, CA 92113
(619) 515-2394
Medical & Dental Services Only

North Park
3544 30th Street
San Diego, CA 92104
(619) 515-2434
Medical & Dental Services Only

North County Health Services (NCHS)

Encinitas
1130 2nd Street
Encinitas, CA 92024
(760) 736-6767
Medical & Psychiatric Services Only

San Marcos
150 Valpreda Road
San Marcos, CA 92069
(760) 736-6700
Medical & Dental Services Only

Oceanside
605 Crouch Str., Bldg. C
Oceanside, CA 92054
(760) 757-4566
Medical Services Only

Oceanside Crouch Dental
619 Crouch St., Ste 100
Oceanside, CA 92054
(760) 566-1620
Dental Services Only

Oceanside Dental
2216 El Camino Real, Ste.121-122
Oceanside, CA 92054
(760) 400-0277
Dental Services Only

Ramona
220 Rotanzi Street
Ramona, CA 92065
(760) 736-6767
Dental Services Only

San Ysidro Health

San Ysidro Health Center
4004 Beyer Boulevard
San Ysidro, CA 92173
(619) 662-4100
(For information and appt. scheduling)
Medical, Dental, and Psychiatric Services

Ocean View
3177 Oceanview Blvd.
San Diego, CA 92113
(619) 662-4100
Medical & Dental Services Only

Chula Vista Medical Plaza
678 Third Avenue
Chula Vista, CA 91910
(619) 662-4100
Medical, Dental & Psychiatric Services

Euclid
286 Euclid Ave #302
San Diego, CA 92114
(619) 662-4100
Psychiatric Services Only

King-Chavez Health Center
950 S. Euclid Ave.
San Diego, CA 92114
(619) 662-4100
Medical, Dental & Psychiatric Services

Maternal Child Health Center
4050 Beyer Blvd
San Ysidro, CA 92173
(619) 662-4100
Medical and Dental Services Only

Mi Clinica
1058 3rd Ave
Chula Vista, CA 91911
(619) 662-4100
Medical Services Only

National City
1136 D Ave
National City, CA 91950
(619)662-4100
Medical Services Only

Otay
1637 3rd Ave
Chula Vista, CA 91910
(619) 662-4100
Medical Services Only

Paradise Hills
2400 E 8th St #A
National City, CA 91950
(619) 662-4100
Medical Services Only

South Bay Family Health and Dental Center
340 E 8th St.
National City, CA 91950
(619) 662-4100
Medical & Dental Services Only

San Diego American Indian Health Center (SDAIHC)

2630 First Avenue
San Diego, CA 92103
(619) 234-2158
Dental Services Only

Vista Community Clinic

Grapevine
134 Grapevine Road
Vista, CA 92083
(760) 631-5000
Medical & Psychiatric Services Only

Horne St
517 North Horne Street
Oceanside, CA 92054
(760) 631-5000
Medical & Psychiatric Services Only

Pier View
818 Pier View Way
Oceanside, CA 92054
(760) 414-3720
Medical Services Only

North River Rd
4700 North River Road
Oceanside, CA 92057
(760) 631-5000
Dental Services Only

Vale Terrace
1000 Vale Terrace
Vista, CA 92084
(760) 631-5000
Medical, Dental & Psychiatric Services Only

UCSD Mother-Child-Adolescent Program

4076 Third Avenue, Ste. 301
San Diego, CA 92103
(619) 543-8089
Medical Services Only

UCSD Owen Clinic

4168 Front Street, 3rd Floor
San Diego, CA 92103
(619) 543-3995
Medical Services Only

RWPCP Eligibility and Enrollment

Eligibility Criteria

RWPCP applicants are screened for eligibility by completion of the RWPCP Application. Individuals eligible for RWPCP are:

- HIV positive
- Residents of San Diego County
- Between the ages of 18 and 64
- Not eligible for insurance or other publicly funded programs* (i.e. Medi-Cal)
- Have a Modified Adjusted Gross Income (MAGI) that does not exceed 500% of the Federal Poverty Level based on household size and income.

* Individuals eligible for medical care through US Department of Veterans Affairs are encouraged to access those benefits but are eligible for RWPCP.

Please note that RWPCP eligibility is not based on assets.

Enrollment Application Guidelines and Clinic Responsibilities

To ensure accurate collection of member information, to avoid member duplication and data entry, and to maintain an accurate enrollment database system, all patient enrollment forms must be completed accurately, using the practices listed below. An original signature must be retained in the patient's file.

- Applications must be completed by clinic staff, printed legibly, and signed by the patient.
- The name and phone number of clinic staff completing the form must be listed.
- Be precise and document which clinic site (no abbreviations) the application is processed.
- The Primary Care Clinic must provide the patient a RWPCP Patient Information Sheet, which outlines the services covered by the Program.
- The Primary Care Clinic staff must provide each patient a copy of the clinic's Patient's Rights and Responsibilities, review the Rights and Responsibilities with the patient, and obtain the patient's signature on the Rights and Responsibilities. The presenting clinic staff member reviewing the Rights and Responsibilities with the client shall also sign and retain a copy of the Rights and Responsibilities or a receipt in the patient's file.
- All applicants must sign an ARIES Consent Form to be eligible to receive services.
- If a patient appears to be eligible for Medicare, Medi-Cal, or Covered California complete the RW-2E Referral Form, giving the original to the patient, and attaching a copy to the RWPCP RW-1E application. A copy of the signed Covered California acknowledgement form shall be retained in the patient's file.
- Patients referred to Medi-Cal will be enrolled in the RWPCP for 60 days. If a Medi-Cal application is not filed within that time frame, the patient's eligibility for the RWPCP will terminate.
- Eligibility will be terminated the last day of the month the ASO is notified of a Medi-Cal denial due to any RW-MF "failure to cooperate" or "failure to provide" reason.

When faxing Program Enrollment forms protect patient confidentiality by <u>always</u> using a fax cover sheet.

- Patients with another form of health insurance are not eligible to receive RWPCP funded primary care services.
- When faxing the enrollment forms to the ASO, please be sure to use the correct fax number (855) 394-7927.

When a patient calls to make an appointment and/or when they come in for an office visit, it is recommended that the eligibility status is verified by checking the RWPCP Eligibility List. If the status is one of the following and the eligibility period has expired, services will not be reimbursed and application or requests for extensions will not be granted:

- RW-FP - financial documentation is pending
- RW-MR – Medi-Cal referred
- RW-MF - Medi-Cal denied, failure to provide

The grace period for RW-FP is 30 days. DO NOT submit a new RWPCP application for someone with one of the above codes. Services provided to the individual after the grace period ends will not be reimbursed by RWPCP until the applicant has complied with the requirements, and the RW eligibility status reflects the change.

REJ Eligibility Code
Applications submitted to the ASO for patients with one of the above status codes will prompt the ASO to change the eligibility code to REJ which indicates that an application has been submitted but rejected because the applicant has not been compliant with the public benefit program referrals or provided documentation of income. The applicant will need to take the following action:

- RW-FP - provide financial documentation
- RW-MR – provide proof that the patient has applied for Medi-Cal
- RW-MF – provide proof that a new Medi-Cal application has been submitted

Application Forms and Timelines
The RWPCP Application screens for eligibility for the RWPCP and the potential eligibility for Medi-Cal and Medicare. The RW-1E or RW-1S form is used to enroll someone in RWPCP.

Enrollment is conducted annually with re-certification conducted mid-year. Consult the RW Eligibility List to determine if the individuals are eligible or must submit an application to re-certify.

Enrollment
If someone has never enrolled in RWPCP, they must enroll using the RWPCP Application (RW-1E or RW-1S).

Recertification
The re-certification process occurs on a semiannual (every six months) basis (See Re-Cert Application).

Application and Re-certification forms should be processed according to procedures described under **Enrollment Application Guidelines and Clinic Responsibilities** (Page 6 of this Handbook) which include retaining a copy for clinic records, and sending the original to the County's ASO, for processing.

Please note: clinic staff members do not determine eligibility timeframes. Eligibility will be determined by the ASO and reported twice per month on the RWPCP Eligibility Listing referenced on Page 9 of this handbook.

Financial Documentation

Screening for referral to other publicly funded programs requires documentation of income.
Income should be reported on the Application as monthly income. An average monthly income may be provided if the income fluctuates between months. Such an average must be supported by the documents provided to demonstrate the applicant's income. Income documentations include:

- The most current Federal or State tax return including the W-2 or 1099
- Pay stub indicating a year-to-date amount (If enrolling prior to the last day of February, a December paystub from the prior year showing a year-to-date amount must also be provided.)
- Disability Award Letter
- Bank statement indicating SSDI, SSA, or VA benefits deposited

A copy of income documentation should be retained with the RWPCP Application. Income documentation is not required to be submitted to the ASO.

If the individual does not have financial documentation when they apply for RWPCP, the income section should be left blank and "$ PENDING" written on the top of the RWPC application. The patient will be granted **30 days** to provide the documentation. Once the income has been documented, write the income on the application, mark out the "$ PENDING", write "COMPLETE" on the top of the application, and either fax the form again to (855) 394-7927 or email to the ASO at COSD_claims@uhc.com **(secure email must be used)** as confirmation the patient has provided necessary documentation.

Eligibility and Enrollment in RWPCP Secondary Dental (RW-DO)

- RW-DO provides dental care to individuals who have medical coverage/insurance but do not have dental coverage/insurance or their dental plan does not cover a procedure available through RWPCP. Medi-Cal and private insurance enrolled individuals are eligible for RW-DO. RWPCP is the last payer, so if a procedure is available through the primary provider, RWPCP will not cover the procedure.

To Enroll an Individual in RWPCP Secondary Dental (RW-DO)

If the applicant is new to RW-DO, if the applicant's eligibility is ending within six weeks, or if the applicant's eligibility has expired, the applicant must complete the Secondary Dental Enrollment Form. Please note: there is no re-certification form for Secondary Dental. Eligibility for Secondary Dental cannot last more than six months.

Referral to Medi-Cal

Individuals are screened for referral to Medi-Cal by completing the RWPCP Application. Individuals referred to Medi-Cal must comply with the referral or will be denied future care until it is shown that they have a pending application.

Medi-Cal is California's Medicaid program, a public health insurance program which provides health care services for low-income individuals including families with children, seniors, persons with disabilities, foster care, pregnant women, and low income people with specific diseases such as tuberculosis, breast cancer, or HIV/AIDS. Eligibility and services available through Medi-Cal are available at:
http://www.dhcs.ca.gov/services/medi-cal/pages/default.aspx
http://www.medi-cal.ca.gov/
http://www.sdcounty.ca.gov/hhsa/programs/ssp/medi-cal_program/index.html.

How does an applicant apply for Medi-Cal?
1. Applying On-Line: Applicants can apply on-line at www.mybenefitscalwin.org.
2. At Rosecrans Health Services Complex:
   http://www.sdcounty.ca.gov/hhsa/facilities/north_central/health_services_complex_rosecrans.html
3. Family Resource Center(s) (FRC):
   http://www.sdcounty.ca.gov/hhsa/programs/ssp/food_stamps/family_resource_centers.html
4. Calling **211**: With the applicants consent, **211** will collect the necessary information and forward the application to the County for processing.

RWPCP Eligibility Listing
The ASO will ensure the enrollment application is complete and will enter the patient's information into the enrollment database. The ASO will contact the clinic representative if the enrollment form is incomplete. Claims for services cannot be processed until enrollment has been entered.

At the beginning of **each month** and **mid-month**, the ASO will distribute via secure email an updated Eligibility List to RWPCP clinics. The RW Eligibility List contains the names of each patient, the clinic enrollment site, their respective eligibility status, and start and end dates. The list will be sorted to show current eligibility periods and recent enrollment history. Clinics are required to verify eligibility for patients on the most recent list prior to billing for services. Remember the Eligibility List may have changes due to activity since last issued.

If your billing department does not already have the RWPCP Eligibility List sent to them bi-monthly via secure email, contact the ASO at (858) 658-8713.

Other Payer Verification
The ASO will compare RWPCP patients against lists of Medi-Cal and Private Insurance providers to determine if any patients have another payer. The activity is to comply with funding source requirements to ensure RW is the payer of last resort. If it is determined the enrollee has other insurance coverage, the eligibility status will be changed to *D2 RW Denied - Other Payer* on the ASO's RWPCP Eligibility List. Claims submitted for these individuals will be denied, and should be submitted to the other payer. If the enrollee has been identified as having another payer source in error, the provider must submit an appeal to the ASO. For a detailed description of the Appeals Process refer to the following section.

Appeal Process
To appeal the other payer finding that a patient has Medi-Cal or another primary insurance, contact the ASO at (858) 658-8713.

If the ASO still finds the patient has another payer source, an appeal should be filed following the same procedure outlined in the Claims Appeal Process (Page 18). The appeal should include supporting documentation showing the patient does not have another payer source. This documentation can include, but is not limited to, a printout from the insurance company's website showing the patient is no longer eligible and a letter of termination.

Patients without Social Security Numbers

When medical and pharmacy claims are processed, the Social Security Number (SSN) is used to identify the patient. Individuals without a social security number are assigned an identification number using the following method:

- 1st three digits = 999
- Remaining six digits = use the month, day and year (last 2 digits) of the patient's birth date
- Example - Patient has a birth date of July 2, 1956. The identification number would be 999-07-0256.

Types of Eligibility

The following eligibility codes are used in the monthly RWPCP Eligibility List to indicate the enrollee's eligibility status.

Status	Description of Status	Bill Services to
RW	RWPCP is Primary Payer	RWPCP
RW-FP	Documentation of annual income was not provided; granted RW for 30 days	RWPCP
RW- MR	Has been referred to Medi-Cal; granted RWPC for 60 days pending proof Medi-Cal has received the application	
RW- MP	An Application for Medi-Cal has been received by Medi-Cal; granted RWPCP until Medi-Cal application has been determined	
RW-MD	Medi-Cal application was denied; granted RWPCP	
D1	RW Denied; Incomplete application	Other Payer/ Patient
D2	RW Denied; Other payer (i.e., private insurance , Medi-Cal or Medicare)	
N-A	Medi-Cal eligible or approved	Medi-Cal
RW-DO	Secondary Dental; Has medical coverage but no dental coverage	RWPCP
REJ	A submitted application has been rejected due to the applicant's failure to comply with eligibility determination requirements	None
RW-MF	Medi-Cal denied, failure to provide	None

RWPCP Covered Services

Medical Services
The RWPCP covers primary care, preventive health care, preventive and emergency dental care, limited psychiatric services and pharmacy services related to the treatment of HIV disease.

Registered physicians, nurse practitioners, and physician assistants should provide all allowable services to RWPCP eligible patients in accordance with generally accepted community standards and practices. Providers shall utilize clinical guidelines and protocols determined by the HIV Health Services Planning Group's Medical Standards and Evaluation Committee.

Medical Services Covered by the RWPCP
- Invasive diagnostic services (covered only when done at a RWPCP Primary Care Clinic)
- Limited psychiatric services
- Primary care services
- Preventive dental care, extractions and fillings
- Nutritional counseling
- Treatment Adherence (TA) counseling
- [Pharmaceuticals in the RWPCP/CMS Drug Formulary](#)

Medical Services Not Covered by the RWPCP
- Emergency Room services
- Inpatient Care
- Outpatient Hospital services
- Transportation (e.g., ambulance)
- Cat Scan
- Invasive Diagnostic Studies/tests*
- MRI and P.E.T. Scans
- Consult and/or care by Specialty physicians or dentists
- Home Health
- Hospice Care
- Infusion Center services

*Invasive diagnostic services are covered by the RWPCP Specialty Care only when done at the primary care clinic by a registered primary care provider. Emergency room and inpatient services are not covered.

Supplemental Medical Services
Allowable supplemental services include non-invasive diagnostic studies, laboratory tests, and radiographs.

Excluded services include consults and treatment by non-Primary Care physicians, CT scans, MRI, invasive diagnostic tests, inpatient and outpatient hospital care, emergency room care, and transportation.

All procedures and services billed to the RWPCP are subject to review. Payment will be denied if invoiced procedures or services are determined unnecessary or unrelated to the patient's HIV infection.

The procedures and services listed in RWPCP Excluded Procedure Codes, whether billed with CPT or HCPCS codes, are never covered by the RWPCP. Exceptions and special circumstances for payment are listed in RWPCP Clinic Agreement Exhibit C: Ryan White Excluded Procedure Codes under the Exceptions column. HSHB may modify this list as appropriate.

Practice Guidelines

A comprehensive medical assessment of persons diagnosed with HIV positive infection is to be provided for any patient not previously treated for HIV infection regardless of the status of symptoms. The patient's medical record must reflect the completion of key assessment components as indicated by the Practice Guidelines.

Screenings and Referrals

Providers shall:

1. Follow the San Diego County Health and Human Services Agency Tuberculosis Screening Guidelines for HIV Infected Patients.
2. Provide an annual referral for preventive dental services for all patients enrolled in the RWPCP. Providers shall refer all new patients to a network dental clinic for an oral evaluation and cleaning as part of the comprehensive visit.
3. Complete a Primary Care HIV Flow Sheet or electronic equivalent for each patient and retain as a part of the patient's medical record.
4. Assess sexual health risk and retain the assessment as a part of the patient's medical record. Clinics may utilize the Sexual Health Risk Assessment Form or their own equivalent process.

RWPCP Specialty Care

AIDS Healthcare Foundation (AHF) contracts with HSHB to administer the Ryan White Specialty Care services. The Ryan White Specialty Care was developed to provide specialty care services to HIV-positive individuals who have no other source to cover expenses for specialty care services. In order to access Ryan White Specialty Care services the patient must be enrolled in the RWPCP. The Specialty Care address HIV related services **NOT** covered by the RWPCP and can be provided by an outside vendor.

Service is available from the following:

1. **Medical Specialty:** covers medically necessary, HIV-related, diagnostic, consultative, and therapeutic outpatient services.

2. **Dental Specialty:** covers necessary dental specialty services.

3. **Home Health:** covers home health care services.

4. **Home Hospice:** covers end-of-life care.

The Medical Specialty

The Medical Specialty is intended to pay for medically necessary, HIV-related, diagnostic, consultative, and therapeutic specialty outpatient services.

These services require authorization by completing and submitting the RWPCP White Specialty Authorization Request form (located in the Specialty Care Handbook and faxing to the Specialty Care Coordinator at (888) 748-1290.

- Determine the patient with specialty service need is eligible for RWPCP by checking the RWPCP Eligibility List.
- Based on the type of Specialty care needed, select an appropriate specialist from the lists located in the Specialty Care Handbook.
- Complete the appropriate Medical or Dental Specialty Care Authorization Request form located in the Specialty Care Handbook.
- Specialty Care authorizations are valid for 90 days from date issued.
- Services must be provided within the timeframe the authorization is valid.

Authorizations and claims for Specialty Care Services are processed by a different ASO, not the RWPCP ASO. Please follow the process described in the Specialty Care Handbook.

RWPCP Dental Services

Providers are required to annually refer patients for dental care. Patients can make appointments directly with a contracted dental clinic. For a list of contracting dental providers, refer to the list located on Page 4. For a listing of covered dental services refer to the RWPCP Allowable Dental Services. Standard of care guidelines set forth by a working group from the Medical Standards and Evaluation Committee are available for reference Practice Guidelines.

Claims should be submitted electronically. If for any reason the claim cannot be submitted electronically, mail the claim to the address listed below:

UnitedHealthcare, ASO - RWPCP
P.O. Box 927110
San Diego, CA 92192

Secondary Dental Services
Clients with some form of health/dental coverage, other than RWPCP, may be eligible for the Secondary Dental if they either do not have dental coverage or the needed service is excluded from the client dental plan. Only palliative care and pain management services are provided. Eligibility and invoicing for RWPCP Secondary Dental Services is processed and administered by the ASO.

Patients enrolled in Secondary Dental Services may receive services at any Primary Care dental clinic funded by RWPCP.

Dental service providers must complete the RWPCP Secondary Dental Services Enrollment Form for each

patient who appears eligible for secondary dental services. All questions must be answered and supporting documentation, when required, should be maintained with the form.

Claims should be submitted electronically. If for any reason the claim cannot be submitted electronically, mail the claim to the address listed below:

UnitedHealthcare, ASO - RWPCP
P.O. Box 927110
San Diego, CA 92192

Nutritional Services

Medical Nutritional Therapy (MNT)
All RWPCP patients are eligible to receive medical nutrition therapy, either as an individual or in a group session. Counseling will be provided by Registered Dieticians (RD) employed by a contracting community clinic.

Supplements
Patients may receive nutritional supplements designated by the Medical Standards and Evaluation Committee when ordered by the primary care practitioner or a Registered Dietician employed by the clinic.

- All nutritional supplements are included in the RWPCP/CMS Drug Formulary
- Maximum supply – 90 units per month; maximum refills – 2

Prior-authorization is required to extend the time period the patient may have nutritional supplements. Patients must be screened for and/or referred to Medi-Cal to qualify for the limit override. A RWPCP Nutritional Supplement Prior Authorization form must be completed.

Claims Submission for Nutritional Therapy
Claims must be submitted electronically or on an approved claim form using the appropriate codes and numbers listed below. For instructions on submitting claims electronically, contact the RWPCP ASO Program Manager at (858) 658-8713.

- CPT code 97802 Initial individual assessment, for each 15 minutes.
- CPT code 97803 Individual re-assessment, intervention or follow-up for each 15 minutes
- CPT code 97804 Group education/intervention (2 or more patients), for each 30 minutes
- Dietician accredited registration number
- NPI (National Provider Identifier number) of Registered Dietician

2020 RWPCP Provider Handbook

Treatment Adherence (TA) Counseling

Each contracted clinic may offer counseling for treatment education and adherence to enrolled RWPCP patients. If the clinic has another payer source, such as RW Part C funds used to support treatment adherence services, the service cannot be charged to the Primary Care services. Treatment Adherence Counselors are required to register with UnitedHealthcare (ASO prior to providing counselor services to patients. Reimbursement will be made to clinics only for treatment adherence services provided by registered counselors who meet the criteria outlined below:

- Employed by a RWPCP contracting clinic
- Completion of an accredited Treatment Adherence Program or;
- The Primary Care Clinic shall designate treatment educators. Treatment educators may include, but are not limited to medical assistants, RNs, LVNs, health educators, pharmacists, or case managers.
- Clinics will be reimbursed for each one-half hour of counseling by a certified counselor. A maximum of 2 units (one hour) may be billed per session a maximum of eight sessions per client per funding year (March through February).

Claims Submission for TA Counseling

- Claims must be submitted electronically using the following billing methods listed below. For instructions on submitting claims electronically, please contact the RWPCP ASO Program Manager at (858) 658-8713.
- HCPCS code S9445
- NPI (National Provider Identifier) number of TA Counselor

Mail to:
UnitedHealthcare, ASO - RWPCP Claims
P.O. Box 927110
San Diego, CA 92192

Treatment Adherence Counselors are <u>required</u> to register with the ASO prior to providing counselor services to RWPCP patients.

Prepared by UnitedHealthcare, the ASO   Page 16   Other Program Services

Pharmacy Services

The RWPCP/CMS Drug Formulary does not have drugs specific for treating HIV infection. Please refer to the posted anti-HIV related drugs covered under the AIDS Drug Assistance Program (ADAP) on the ADAP website http://www.cdph.ca.gov/programs/aids/Pages/tOAADAPindiv.aspx.

Claims

Medical services are paid to a Primary Care Clinic at a negotiated rate.   For a listing of excluded procedure codes refer to RWPCP Medical Care Excluded Procedures Codes.

Claims Procedure

In order for claims to be processed for payment, all claims must follow standard billing practices and include the following information:

- Patient name
- Patient address
- Patient Social Security Number
- Patient date of birth
- Date(s) of service
- Current E&M, CPT, HCPCS and/or ADA codes
- All documentation and addendum required by Medi-Cal (e.g., full itemization of unlisted drugs and supplies)
- ICD-10 code(s) as appropriate to date of service
- Practitioner's name and specific NPI number (includes medical providers, nutritionists, and TA counselors)
- Provider's tax identification number
- Full itemization of charges
- Submit medical claims with E&M and CPT codes on CMS-1500 billing form or submit electronically.
- Group CMS-1500 claims separately from County Medical Services (CMS) claims.
- Primary Care Clinics are required to submit claims electronically. If assistance is needed, please contact the RWPCP ASO Program Manager at (858) 658-8713.

All claims must be received by the ASO no later than 60 days from the date of service or by 30 days after the end of the fiscal year, whichever comes first.

If a claim cannot be submitted electronically, you may mail your claim to:

UnitedHealthcare, ASO – RWPCP Claims
P.O. Box 927110
San Diego, CA 92192

Keep in Mind:
To avoid denials or delays in claims processing, please do not submit RWPCP claims with CMS claims.

Claims Filing Deadlines

Effective for services starting December 1, 2018, the claim and appeal filing deadlines are as follows:

Dates of Service	Claims deadline	Appeals deadline	Comments
March 1, 2019 – January 31, 2020	60 days from date of service	Within 30 days of the denial notification but no later than May 1, 2020, whichever comes first	
February 1, 2020 – February 29, 2020	March 31, 2020	May 1, 2020	United Healthcare will send the End of Year Close-out schedule notification

Claims Appeal Process

To appeal a denied claim, resubmit the claim with a detailed explanation and justification for payment within the deadlines noted above. Under no circumstances shall processed claims be appealed more than forty-five (45) days after the end of the federal funding cycle.

Medi-Cal Conversion

In the event that a RWPCP patient becomes eligible for Medi-Cal during a Program Year, the clinic may bill Medi-Cal for all medical services provided after the Medi-Cal effective date and will reimburse the RWPCP the actual amount paid for services during that time-frame. If the ASO does not receive repayment within thirty (30) days of notification of Medi-Cal eligibility, future payments to the clinic may be adjusted.

Mail payment appeals to:

UnitedHealthcare, ASO - RWPCP Appeals
Attention: Claims Department
P.O. Box 927110
San Diego, CA 92192

Useful Phone Numbers

RWPCP Eligibility Verification
(800) 587-8118
(858) 658-8713

General Claims Questions
All claims related inquiries, including questions regarding claim status must be emailed or faxed. Email inquiries to: COSD_claims@uhc.com. Fax inquiries to 855-397-7927.

Director of MSO Operations
(858) 658-8713

Program Information
(619) 293-4700